Image# 12970947233 PAGE 1 / 18

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other	er Than An	Authorize	d Committe	ee		Office Use Only	/
NAME OF COMMITTEE (in full)	_	PRINT ▼		ample: If typion	ng, type	12FE4M5		
National Nurses l	Jnited PAC	- A Fund fo	or a Healt	hy Americ	a			
ADDRESS (number and st		enton Street, Su	uite 1100					
Check if differer than previously reported. (ACC)	Silver	Spring				MD	20910]-[
2. FEC IDENTIFICATI	ON NUMBER 1	-	CITY ▲		;	STATE A	ZIP (CODE A
C C00446237		;	3. IS THIS REPORT	\ <u>\</u>	NEW N) OR	AN (A)	MENDED	
4. TYPE OF REPOR	R	onthly eport ue On:	Feb 20 (M2)	- 1	May 20 (M5)		20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports	s:	H	Mar 20 (M3) Apr 20 (M4)		Jun 20 (M6) Jul 20 (M7)		20 (M9) 20 (M10)	(Non-Election Year Only) Jan 31 (YE)
X April 15 Quarterly Re	eport (Q1) (c)	12-Day	Api 20 (W4)	Primary (12F				
July 15 Quarterly Re		PRE-Election				General		Runoff (12R)
October 15 Quarterly Ro	eport (Q3)	Report for the	ie:	Convention (120)	Special (125)	
January 31 Year-End Ro	eport (YE)	E	lection on	M = M /	D D /	Y Y Y Y	in th State	
July 31 Mid Report (Nor Year Only)	n-election (u)	30-Day POST-Election Report for the		General (300	G)	Runoff (3	30R)	Special (30S)
Termination (TER)	Report	·	lection on	M = M /	D = D /	Y . Y . Y . Y	in th State	
5. Covering Period)12	through	M M	31	2012]
I certify that I have exam	ined this Report	and to the be	st of my kno	wledge and l	belief it is tru	ie, correct an	d complete.	
Type or Print Name of Ti	reasurer Caroly	n Hietamaki						
Signature of Treasurer	Carolyn Hietama	aki		[Electronicall	y Filed]	Date 04	15	2012
NOTE: Submission of false	e, erroneous, or ir	ncomplete inforr	nation may s	ubject the pers	son signing th	nis Report to the	ne penalties of	2 U.S.C. §437g.
Office Use Only							FEC FC Rev. 12	

	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
V	rite or Type Committee Name		
1	National Nurses United PAC - A Fu	und for a Healthy America	
R	eport Covering the Period: From:	1 01 2012 To	o: 03 / 31 / 2012
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2012		37626.84
	(b) Cash on Hand at Beginning of Reporting Period	37626.84	
	(c) Total Receipts (from Line 19)	13151.15	13151.15
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50777.99	50777.99
7.	Total Disbursements (from Line 31)	8322.13	8322.13
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42455.86	42455.86
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	This committee has qualified as a multica	andidate committee. (see FEC FORM 1M)	
	1	For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Nurses United PAC - A Fund for a Healthy America

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	1	
(a) Individuals/Persons Other		
Than Political Committees	1110.00	1110.00
(i) Itemized (use Schedule A)	1110.00	7
(ii) Unitemized	11810.00	11810.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	12920.00	12920.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	40000.00	12920.00
Totals to Line 33, page 5)	12920.00	12920.00
. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Long Banawards Banainad	0.00	0.00
. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	231.15	231.15
5. Refunds of Contributions Made	7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
() T : 1 T ((11 (2)) 1 (2))		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d),	0.00	
12, 13, 14, 15, 16, 17, and 18(c))▶	13151.15	13151.1
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	13151.15	13151.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calelidal Teal-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating		3.00		
Expenditures	322.13	322.13		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b))	▶ 322.13	322.13		
Transfers to Affiliated/Other Party	0.00	0.00		
Contributions to		0.00		
Federal Candidates/Committees and Other Political Committees	7000.00	7000.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)		0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use concaule 1)				
Loan Repayments Made	0.00	0.00		
Leono Mede	0.00	0.00		
Loans MadeRefunds of Contributions To:		0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees		0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00			
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))	• 0.00	0.00		
Other Disbursements	1000.00	1000.00		
Other Disbursements	1000.00	1000.00		
Federal Election Activity (2 U.S.C. §4	31(20))			
(a) Allocated Federal Election Activit	y			
(from Schedule H6)	0.00	0.00		
(i) Federal Share		0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid En				
With Federal Funds		0.00		
(c) Total Federal Election Activity (ac		0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b)) P	0.00		
Total Disbursements (add Lines 21(c)	, 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c)) 8322.13	8322.13		
Total Enderel Dieburgsgrants				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)	(ii)			
from Line 31)		8322.13		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

1 LO 1 01111 3X (Nev. 02/2003)		i age 3
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12920.00	12920.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12920.00	12920.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	322.13	322.13
7. Offsets to Operating Expenditures (from Line 15, page 3)	231.15	231.15
8. Net Operating Expenditures (subtract Line 37 from Line 36)	90.98	90.98

FOR LINE NUMBER: **PAGE** 6 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

18

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Nurses United PAC - A Fund for a Healthy America Full Name (Last, First, Middle Initial) Carolyn Bowden Date of Receipt Mailing Address 7908 Winthorpe St 20 2012 01 City State Zip Code Transaction ID: C3570440 CA Oakland 94605 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation CA Nurses Asso. Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carolyn Bowden Date of Receipt Mailing Address 7908 Winthorpe St 2012 01 31 City State Zip Code Transaction ID: C3570385 CA Oakland 94605 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation CA Nurses Asso. Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carolyn Bowden Date of Receipt Mailing Address 7908 Winthorpe St 2012 02 14 City State Zip Code Transaction ID: C3616400 CA Oakland 94605 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation CA Nurses Asso. Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		7	OF	18
ı	(check only one)								
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	13		14		15		16		17

Any information copied from such Reports and Sour for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
igwedge National Nurses United PAC - A	Fund for a Healthy America	
Full Name (Last, First, Middle Initial) A. Carolyn Bowden		Date of Receipt
Mailing Address 7908 Winthorpe St		02 29 2012
City	State Zip Code	Transaction ID : C3616452
Oakland	CA 94605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
CA Nurses Asso.	Labor Rep	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Carolyn Bowden		Date of Receipt
Mailing Address 7908 Winthorpe St		03 15 2012
City	State Zip Code	U3 15 2012 Transaction ID : C3662054
Oakland	CA 94605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
CA Nurses Asso.	Labor Rep	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Carolyn Bowden		Date of Receipt
Mailing Address 7908 Winthorpe St		03 31 2012
City	State Zip Code	Transaction ID : C3697760
Oakland	CA 94605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
CA Nurses Asso.	Labor Rep	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	>	150.00
TOTAL This Period (last page this line number of	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	PAGE	-	8	OF	18				
(check only one)									
X	11a		11b		11c		12	!	
	13		14		15		16	;	17

- A Fund for a Healthy America	
	Date of Receipt
	01 20 2012
State Zip Code	Transaction ID : C3570444
CA 90291	Amount of Each Receipt this Period
C	35.00
Occupation	-
Nursing Practice Rep	
Aggregate Year-to-Date ▼	1
gg. cgato Tour to Bato V	
210.00	
	Date of Receipt
	01 31 2012
State Zip Code	Transaction ID : C3570389
CA 90291	Amount of Each Receipt this Period
U .	35.00
Occupation	1
Nursing Practice Rep	
Aggregate Year-to-Date ▼	1
0.0	
210.00	
	Date of Receipt
	02 14 2012
State Zip Code	Transaction ID : C3616404
CA 90291	Amount of Each Receipt this Period
C	35.00
Occupation	-
Nursing Practice Rep	
Aggregate Year-to-Date ▼	
240.00	
210.00	
	105.00
	State Zip Code CA 90291 C Occupation Nursing Practice Rep Aggregate Year-to-Date ▼ 210.00 State Zip Code CA 90291 C Occupation Nursing Practice Rep Aggregate Year-to-Date ▼ 210.00 State Zip Code CA 90291 C Occupation Nursing Practice Rep Aggregate Year-to-Date ▼ C Occupation Nursing Practice Rep Aggregate Year-to-Date ▼

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		9	OF	18
(check only one)									
X	11a		11b		11c		12		
	13		14		15		16	;	17

	nd Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
/ National Nurses United PAC	- A Fund for a Healthy America	
Full Name (Last, First, Middle Initial) A. Kathy Carder		Date of Receipt
Mailing Address 1026 Pleasant View		02 29 2012
City	State Zip Code	Transaction ID : C3616456
Venice	CA 90291	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	1
CA Nurses Asso.	Nursing Practice Rep	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) Kathy Carder		Date of Receipt
Mailing Address 1026 Pleasant View		03 15 2012
City	State Zip Code	Transaction ID : C3662058
Venice	CA 90291	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	35.00
Name of Employer	Occupation	
CA Nurses Asso.	Nursing Practice Rep]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) Carder		Date of Receipt
Mailing Address 1026 Pleasant View		03 31 2012
City	State Zip Code	Transaction ID : C3697764
Venice	CA 90291	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	-
CA Nurses Asso.	Nursing Practice Rep	4
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	210.00	
Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional) >	105.00
	<u>, </u>	
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Nurses United PAC - A Fund for a Healthy America Full Name (Last, First, Middle Initial) Martese Chism Date of Receipt Mailing Address 1111 S Laflin St 06 2012 City State Zip Code Transaction ID: C3421651 Chicago IL 60607-4621 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Stroger Hospital Dialysis Registered Nurse Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Martese Chism Date of Receipt Mailing Address 1111 S Laflin St 02 2012 06 City State Zip Code Transaction ID: C3571245 IL Chicago 60607-4621 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Stroger Hospital Dialysis Registered Nurse Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Martese Chism Date of Receipt Mailing Address 1111 S Laflin St 2012 03 06 City State Zip Code Transaction ID: C3618902 IL Chicago 60607-4621 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Dialysis Registered Nurse Stroger Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 18 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Nurses United PAC - A Fund for a Healthy America Full Name (Last, First, Middle Initial) Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 20 2012 City State Zip Code Transaction ID : C3570451 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 2012 01 31 City State Zip Code Transaction ID: C3570410 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 2012 02 14 City State Zip Code Transaction ID: C3616410 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Nurses United PAC - A Fund for a Healthy America Full Name (Last, First, Middle Initial) Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 2012 29 City Zip Code State Transaction ID: C3616462 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 03 15 2012 City State Zip Code Transaction ID: C3662070 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Dunne Date of Receipt Mailing Address 3050 Stanton Ave 03 31 2012 City Zip Code State Transaction ID: C3697770 CA Berkeley 91222 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation NNU Labor Rep Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 1110.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 OF 18					
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)					
	Detailed Summary Page	11a 11b 11c 12					
Any information copied from such Reports and S	Ptatamenta may not be cold or used by any n	13 14 X 15 16 17					
or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full)							
National Nurses United PAC - A	A Fund for a Healthy America						
<u>/</u>	<u> </u>						
Full Name (Last, First, Middle Initial) A. National Nurses United		Date of Receipt					
Mailing Address 2000 Franklin Street		M M / D D / Y Y Y Y Y					
maming stations 2000 Frankin Otrock		02 13 2012					
City	State Zip Code	Transaction ID: C3601262					
Oakland	CA 94612	Amount of Each Receipt this Period					
FEC ID number of contributing	C	139.65					
federal political committee.		7					
Name of Employer	Occupation						
Descire Form							
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify)	231.15	Admin & overhaead reimbursement					
	7	4					
Full Name (Last, First, Middle Initial)							
B. National Nurses United		Date of Receipt					
Mailing Address 2000 Franklin Street		M M / D D / Y Y Y Y Y					
City	State Zip Code	03 08 2012 Transaction ID : C3682466					
Oakland	CA 94612	Amount of Each Receipt this Period					
FEC ID number of contributing	С	04.50					
federal political committee.	C	91.50					
Name of Employer	Occupation						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	231.15	Admin & overhaead reimbursement					
Cuter (speedily)		J. Committee of the com					
Full Name (Last, First, Middle Initial)							
C		Date of Receipt					
Mailing Address		M = M / D = D / Y = Y = Y					
City	State Zip Code						
,	·	Amount of Each Receipt this Period					
FEC ID number of contributing							
federal political committee.	C						
Name of Employer	Occupation	_					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General		1					
Other (specify) ▼	7 7 7	J					
SUBTOTAL of Receipts This Page (optional)		231.15					
TOTAL This Period (last page this line number		231.15					

TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER:					PAGE 14 OF 18					
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the) (ched	ck only	one)		_			1.6-		
		Detailed Summary Page	×	21b 27	22 28a	23	L	24 280	,	25 29		26 30b
۸.	ry information copied from such Reports and Staten	nente may not be cold or ::	sed by an								tions	
	for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full)											
$ \rangle$	National Nurses United PAC - A Fu	ınd for a Healthy A	merica									
<u></u>	Full Name (Last, First, Middle Initial)											
Α.	First Data Merchant Services					f Disbui	sem	ent				
	Mailing Address 5565 Glenridge Connector NE, Suite				M M	/ 0	03	1)12	Υ	
	City	State Zip Code										
	Atlanta	GA 30342			Trans	action	ID :	D4322	42			
	Purpose of Disbursement Credit card processing fees			\neg			. 5					
	Candidate Name			الب	Amoun	t of Ead	n D	isburs	ement	this	Perio	a
			Catego Type			,				47	'.25	
	Office Sought: House Disbursen											
		Primary General Other (specify) ▼										
	State: District:	Caroli (opcony)										
	Full Name (Last, First, Middle Initial)											
В.	First Data Merchant Services				Date o	f Disbui	sem	ent				
	Mailing Address 5565 Glenridge Connector NE, Suite				M M M	/ 0	11	/		012	Y	
					4,							
	City S Atlanta	State Zip Code GA 30342			Trans	saction	ID :	D4322	243			
	Purpose of Disbursement	JUJ42		=								
	Credit card processing fees				Amoun	t of Ead	h D	isburs	ement	this I	Perio	d
	Candidate Name		Catego							92	2.40	
	Office Sought: House Disbursen	nent For:	Турс			7						
		Primary General										
	President State: District:	Other (specify) ▼										
_	Full Name (Last, First, Middle Initial)											
C.	First Data Merchant Services				Date o	f Disbui	sem	ent				
	Mailing Address 5565 Glenridge Connector NE, Suite				02	/ 0	03	1)12	Υ	
					02		J.J			- 12		
	,	State Zip Code			Trans	saction	ID :	D4322	244			
	Purpose of Disbursement	GA 30342		=								
	Credit card processing fees				Amoun	t of Ead	h D	isburs	ement	this	Perio	d
	Candidate Name		Catego					-		46	5.55	٦
	Office Sought: House Disbursen	nent For:	Туре	*		7	÷	7			_	_
		Primary General										
		Other (specify) ▼										
_	State: District:											
,	UBTOTAL of Disbursements This Page (optional)					-				186	.20	7
F	ago (optional)				-	,	÷	,	+		=	7
1	OTAL This Period (last page this line number only)					- 1		,				╝

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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 15 OF 18				
ITEMIZED DISBURSEMENTS	Use separate schedule(s	s) (check only one)					
	for each category of the Detailed Summary Page	` X 21b	22 23 24 25 26				
	Dotailed Guillinary 1 age	27	28a 28b 28c 29 30k				
Any information copied from such Reports and States or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)	and address of any point	001111111100 10	- 12 Communication from Guoti Communico.				
National Nurses United PAC - A F	und for a Healthy A	merica					
\bigvee							
Full Name (Last, First, Middle Initial) A. First Data Merchant Services			Date of Disbursement				
First Data Merchant Services			M M / D D / Y Y Y Y				
Mailing Address 5565 Glenridge Connector NE, Su	ite		02 13 2012				
City	State Zip Code		Transaction ID : D432245				
Atlanta	GA 30342		Transaction id . D432245				
Purpose of Disbursement Credit card processing fees			Amount of Each Disbursement this Period				
Candidate Name		0.11.11.1	Amount of Lacif biobulsement this remou				
		Category/ Type	44.95				
	ment For:						
Senate	Primary General						
President State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. First Data Merchant Services			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 5565 Glenridge Connector NE, Su	uite		03 05 2012				
City	State Zin Code						
City Atlanta	State Zip Code GA 30342		Transaction ID: D432246				
Purpose of Disbursement	33312						
Credit card processing fees			Amount of Each Disbursement this Period				
Candidate Name		Category/	46.03				
Office Sought: House Dishurs	mont For:	Туре	40.00				
Office Sought: House Disburser Senate	ment For: Primary General						
President	Other (specify)						
State: District:	₹1						
Full Name (Last, First, Middle Initial)							
C. First Data Merchant Services			Date of Disbursement				
Mailing Address EEEE Clansides Connectes NE Con	Mailing Address 5565 Glenridge Connector NE, Suite						
walling Address 5505 Glerinage Connector NE, Su	03 13 2012						
City	State Zip Code		Transaction ID : D432247				
Atlanta	GA 30342						
Purpose of Disbursement Credit card processing fees			Amount of Fook Biokenson at this B				
Candidate Name		Cotocomi	Amount of Each Disbursement this Period				
		Category/ Type	44.95				
Office Sought: House Disburser	ment For:		, , , , , , , , , , , , , , , , , , , ,				
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
SURTOTAL of Disbursoments This Boss (antional)			135.93				
SUBTOTAL of Disbursements This Page (optional)		······					
TOTAL This Period (last page this line number only)		322.13				

2	CHEDULE B (FEC Form 3X)			
3	CHEDOLE B (FEC FOIII 3X)	Use separate schedule(s	FOR LINE	
ΙΤ	EMIZED DISBURSEMENTS	for each category of the	(CIJECK OIII)	
		Detailed Summary Page	21b	22 🗙 23 24 25 26
		,	27	28a 28b 28c 29 30b
Α	ny information copied from such Reports and Staten	nents may not be sold or u	sed by any pers	on for the purpose of soliciting contributions
10	r for commercial purposes, other than using the nam	ne and address of any polit	ical committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\	National Nurses United PAC - A Fu	ind for a Healthy A	merica	
/	Tradional Trained Chiled 1710 7110	and for a mountry 7	monoa	
	Full Name (Last, First, Middle Initial)			
Α.	Bera for Congress			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address Post Office Box 582496			02 20 2012
	City	State Zip Code		Transaction ID : D420311
	Elk Grove	CA 95758		Transaction iD . D420311
	Purpose of Disbursement Contribution			
				Amount of Each Disbursement this Period
	Candidate Name		Category/	1000.00
	Ami Bera		Type	1000.00
		nent For: 2012		
	Senate	Primary General		
	President	Other (specify) ▼		
	State: CA District: 03			
	Full Name (Last, First, Middle Initial)			
В.	Friends of Bernie Sanders			Date of Disbursement
				M = M / D = D / Y = Y = Y
	Mailing Address PO Box 391			03 28 2012
	•	State Zip Code		Transaction ID : D429900
	Burlington	VT 05402-0391		
	Purpose of Disbursement Contribution			Assessment of Foods Dichesses and this Deviced
				Amount of Each Disbursement this Period
	Candidate Name		Category/	2000.00
	BERNARD SANDERS		Type	
		nent For: 2012		
		Primary General		
	President	Other (specify) ▼		
	State: VT District: 00			
_	Full Name (Last, First, Middle Initial)			
C.	McDowell for Congress			Date of Disbursement
				M M / D D / Y Y Y Y
	Mailing Address P.O. Box 913			02 20 2012
	Otto	75.0.4.		
	City Sault Ste. Marie	State Zip Code MI 49783		Transaction ID : D420312
	Purpose of Disbursement	49703		
	Contribution			Assessment of Foods Dichesses and this Deviced
	Candidate Name			Amount of Each Disbursement this Period
	Gary McDowell		Category/ Type	1000.00
		nent For: 2012	1,900	
		Primary General		
	President	Other (specify)		
		- (-1:J) \		
	State: MI District: 01			
	State: MI District: 01			
				4000.00
Ş	State: MI District: 01 SUBTOTAL of Disbursements This Page (optional)		>	4000.00
				4000.00

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 17 OF 18					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b	22 X 23 24 25 20 20 20 20 20 20 20 20 20 20 20 20 20	26			
Γ		27	28a 28b 28c 29	30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				\$			
NAME OF COMMITTEE (In Full)							
National Nurses United PAC - A Fu	ınd for a Healthy Ar	nerica					
Full Name (Last, First, Middle Initial)							
A. McDowell for Congress			Date of Disbursement				
Mailing Address P.O. Box 913			02 16 2012				
,	State Zip Code		Transaction ID : D432248				
Sault Ste. Marie	MI 49783		Transaction ib . 5452240				
Purpose of Disbursement Contribution			Amount of Each Disbursement this Perio	od			
Candidate Name		Category/	1000.00	П			
Gary McDowell		Туре	1000.00	_			
	nent For: 2012 Primary General Other (specify)						
State: MI District: 01							
Full Name (Last, First, Middle Initial)							
- JANICE HAHN FOR CONGRESS			Date of Disbursement				
Mailing Address 1379 W Park Western Dr			02 16 2012				
City San Pedro	State Zip Code CA 90732-2300		Transaction ID : D432249				
Purpose of Disbursement Contribution		· · ·	Amount of Each Disbursement this Perio	od			
Candidate Name Janice Hahn		Category/ Type	1000.00	٦			
	nent For: 2012	1,700					
	Primary General Other (specify) ▼						
State: CA District: 44							
Full Name (Last, First, Middle Initial) Re-Elect Congressman Kucinich Committee			Date of Disbursement				
			M - M / D D / Y - Y - Y				
Mailing Address 550 E Walnut St			02 22 2012				
•	State Zip Code OH 43215-5323		Transaction ID : D420391				
Purpose of Disbursement Contribution			A				
Candidate Name		0.11	Amount of Each Disbursement this Perio)a			
Dennis J Kucinich		Category/ Type	1000.00				
Senate President	nent For: 2012 Primary General Other (specify)	71					
State: OH District: 09							
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00				
TOTAL This Period (last page this line number only)		·····	7000.00				

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 18 OF 18				
TEMIZED DISBURSEMENTS	Use separate schedule(s)						
	for each category of the Detailed Summary Page	21b	22 23 24 25 26				
	_ Janua Janinary r ago	27	28a 28b 28c X 29 30				
Any information copied from such Reports and Statem							
or for commercial purposes, other than using the name	e and address of any politication	al committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	1.6 11 141 A						
angle National Nurses United PAC - A Fu	ind for a Healthy Am	nerica					
Full Name (Last, First, Middle Initial)							
A. Arizona Advocacy Network			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address 1450 East Indian School Road			02 07 2012				
City	State Zip Code						
Phoenix	AZ 85014		Transaction ID: D420392				
Purpose of Disbursement							
Donation		l II	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Office Sought: House Disbursen	ant For	Туре	1000.00				
	Primary General						
	Other (specify)						
State: District:	(1 · 3// ∀						
Full Name (Last, First, Middle Initial)							
3.			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address							
City	State Zip Code						
•	·						
Purpose of Disbursement							
Candidate Name			Amount of Each Disbursement this Period				
Candidate Name		Category/ Type					
Office Sought: House Disbursen	nent For:	Турс	, , , , , , , , , , , , , , , , , , , ,				
	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			Data of Diahuwa and				
> .			Date of Disbursement				
Mailing Address			M M / D D / Y Y Y Y				
Maining / Idanose							
City	State Zip Code						
Purpose of Disbursement							
Fulpose of Disbursement			Assessed of Foods Biological and this Books de				
Candidate Name		Cata nami/	Amount of Each Disbursement this Period				
		Category/ Type					
Office Sought: House Disbursen	nent For:						
	Primary General						
	Other (specify) ▼						
State: District:							
CURTOTAL of Diohumanmenta This David (autism)			1000.00				
SUBTOTAL of Disbursements This Page (optional)		·····	1000.00				
TOTAL This Period (last page this line number only).			1000.00				